Certificate of Mailing
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date November 17000.

**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Yu et al.	) Examiner: Sneeda Anmed )
Serial No.: 09/912,099	Group Art Unit: 1773
Filed: July 24, 2001	RECT
For: MOISTURE CROSSLINKABLE THERMOPLASTICS IN THE MANUFACTURE OF VEHICLE WEATHER STRIPS	TC 1700
Attorney Docket No.: CSAZ 2 00145	Cleveland, OH 44114
Assistant Commissioner for Detents	

Assistant Commissioner for Patents Washington, D.C. 20231

## **AMENDMENT A**

Dear Sir:

This communication is responsive to the outstanding Office Action issued on August 27, 2002 in connection with the above captioned patent application. Please amend the application as follows:

## IN THE CLAIMS:

Please delete non-elected, withdrawn claims 1-20. Applicant hereby expressly reserves the right to pursue the subject matter of these claims by the way of a divisional application.

ERTIFICATE OF MAILING

I hereby certify that this AMENDMENT A in connection with U.S. Patent Application Serial No. 09/912,099 is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Non-Fee Amendment, Assistant Commissioner for Patents, Washington, DC 20231, on November 27, 2002.

## AMENDMENT TRANSMITTAL LETTER

Attorney Docket No.: CSAZ 2 00145

Serial No.: 09/912,099	Filing Date: July 24, 2001 Examiner: Sheeba Ahmed				
Group Art Unit: 1773	Invention: MOISTURE CROSSLINKABLE THERMOPLASTICS IN THE MANUFACTURE OF VEHICLE WEATHER STRIPS				

To the Assistant Commissioner of Patents and Trademarks:

Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	Claims remaining Highest Number No. of Extra Rate after amendment Previously Paid For Claims Present		Rate	Additional Rate		
Total Claims	9	Minus	29	0	X 18	\$ 0
Indep. Claims	2	Minus	4	0	X 84	\$ 0

No additional fee is required. X

Please charge any additional fees or credit overpayment to Deposit Account X No. 24-0037. RECEIVED
TC 1700

Respectfully submitted,

FAY, SHARPE, FAGAN, MINNICH & MCKEE, LLP

Date: November 27, 2002

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